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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\* *Name 20*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\* *Name 20*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

04/01/2000

\*\* SMALL ENTITY \*\*

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ <i>20</i>	SHEETS DRAWING 1 <i>20</i>	TOTAL CLAIMS <i>44</i> <i>20</i>	INDEPENDENT CLAIMS 3 <i>20</i>
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>20</i>	Initials			

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*20*

## TITLE

Rule based security policy enforcement

*20*

FILING FEE RECEIVED 671	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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